

## Inventor Information

Inventor One Given Name:: Anand  
Family Name:: Baichwal  
Postal Address Line One:: 5 Kendall Drive  
City:: Wappingers Falls  
State or Province:: NY  
Postal or Zip Code:: 12590  
Citizenship Country:: USA

Inventor Two Given Name:: John  
Family Name:: Staniforth  
Postal Address Line One:: 170 Bloomfield Road  
City:: Bath  
State or Province:: England  
Postal or Zip Code:: BA2 2 AT  
Citizenship Country:: England

Inventor Three Given Name::  
Family Name::  
Postal Address Line One::  
City::  
State or Province::  
Postal or Zip Code::  
Citizenship Country::

## Correspondence Information

Correspondence Customer Number:: 23280  
Telephone:: (212) 736-1940  
Fax:: (212) 736-2427  
Electronic Mail:: [ddk@ddkpatent.com](mailto:ddk@ddkpatent.com)

## Application Information

Title Line One:: Controlled Release Insufflation  
Title Line Two:: Carrier For Medicaments  
Total Drawings Sheets:: None  
Formal Drawings::  
Application Type:: Utility  
Docket Number:: 540.1004CON2

## Representative Information

Representative Customer Number:: 23280

## Continuity Information

This application is a:: Continuation of  
> Application One:: 09/361,198  
Filing Date:: 07-26-99

which is a:: Continuation of  
>> Application Two:: 08/787,762  
Filing Date:: 01-28-97  
Patent Number::

which is a:: Divisional of  
>>> Application Three:: 08/419,635  
Filing Date:: 04-07-95  
Patent Number:: U.S. Patent No. 5,612,053

which is a::  
>> Application Two::  
Filing Date::  
Patent Number::

## Assignee Information

Name:: Penwest Pharmaceuticals Co.  
Postal Address Line One:: 2981 Route 22  
City:: Patterson  
Country:: USA  
Postal or Zip Code:: 12563-9970